



VISTA Member Registration Form

1. NAME (Last, first, middle)

Last

First

Middle

2. SOCIAL SECURITY NUMBER

3. CNS State Office

4. DATE ENTERED ON DUTY

5. NEXT OF KIN (Person to notify in case of emergency)

Name (Last, first, middle)

Relationship (Mother, father, etc.)

(Area Code) Telephone Number

Street Address:

City, State, Zip Code:

6. OATH OF SERVICE*

The following oath or affirmation of service is required by the Domestic Volunteer Service Act of 1973, as amended, and must be administered by an authorized staff member of the Corporation for National Service or a notary public:

I do solemnly swear (*or affirm*) that I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So help me God.

AmeriCorps*VISTA Member's signature _____ Date _____

*NOTE: The words "*So help me God*" in the oath, and the word "*swear*" wherever it appears above, should be stricken out when the Member elects to affirm rather than swear to the Oath of Service; only these words may be stricken and only when the Members elects to affirm the Oath of Service.

Subscribed and sworn to (affirmed) before me this _____ day of _____, _____

Signature _____ Title _____